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I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).							
hereb	y appoint:						
X Practitioners associated with the Customer Number:			:	49579			
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	Name		Registration Number			Registration Number	
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as attorney(s) or apent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned angle to the undersigned according to the USPTO assignment records or assignment documents attached to his form in accordance with 37 CPR 3.73(b).							
Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:							
To the deprication real line attached statement under 37 CFR 3.73(b) to:							
X	X The address associated with Customer Number: 26111						
OR	The doutess as:	lociated with Customer Number:					
Fir	Firm or Individual Name						
Address							
						1	
City			State			Zip	
Country		-					
Telephone Email							
				CHAIL			
Assignee	Name and Addre	ess:					
			adcom Corp				
5300 California Avenue Irvine, California 92617							
			· .				
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be							
the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.							
SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee							
Signature		4 miles			Date	4/9/17	
Vame	Dee Hende	erson			Telephone	7/1/0/	
l'itle			perty Admin	letration	1 orchion	e (949) 926-5000	
Senior Manager, Intellectual Property Administration							

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